

POSITION	ID NO.	DATE
CLASSIFIER	8	3-26-96
EXAMINER	38	4-19-96
TYPIST	57	4-24-96
VERIFIER	333	4-25-96
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
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SYMBOLS

- ✓ Rejected
- Allowed
- (Through number) Cancelled
- Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
Final	
Original	
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